



229893

## REQUEST FOR EXTENSION TO COMPLY WITH ORDER (ORS Rev 3-2-10)

2011.111.T

<b>File the original with:</b>  <b>Public Service Commission of South Carolina</b> <b>Clark's Office</b> <b>Motor Carrier Matters</b> <b>P.O. Box 11649</b> <b>Columbia, S.C. 29211</b> <b>(803) 896 - 5100</b> <b>FAX (803) 896-5199</b>	<b>Mail or fax a copy to:</b>  <b>S.C. Office of Regulatory Staff</b> <b>Transportation Department</b> <b>1401 Main Street, Suite 900</b> <b>Columbia, S.C. 29201</b> <b>(803) 737-0578</b> <b>FAX (803) 737-0815</b>
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DATE: 5/23/11

The S.C. Public Service Commission issued a Certificate of Public Convenience and Necessity

In Order # 2011-315 dated 4/26/11 for the following type of certificate:☐ Class C Taxi ☐ Class C Charter ☐ Class C Charter Bus ☒ Class C Non-Emergency

Pursuant to that Order, the following carrier was given sixty (60) days from the date of the Order to comply with the requirements of certification.

Please consider this as a request for an extension until \_\_\_\_\_ to allow the following carrier to come into compliance. (DATE)

**EXTENSIONS ARE NOT EFFECTIVE UNTIL APPROVED BY THE PUBLIC SERVICE COMMISSION.**MOBI-CARE MEDICAL  
TRANSPORT, LLC  
(Name of Company)D/B/A \_\_\_\_\_  
(if applicable)2 OFFICE PARK CT. SUITE 201  
(Street Address)

(Mailing Address, City, State, Zip)

COLUMBIA, SC 29223  
(City, State, Zip Code)

(Signature)

PSC SC  
MAIL / DMS803-462-1381  
(Telephone Number)Owner

(Title) Owner, President, etc.

**Reason for Request for Extension to comply with PSC Order:**WISH TO EXTEND TO AUGUST 1<sup>ST</sup>, 2011 AS THIS  
IS OUR PROJECTED DATE TO BEGIN TRANSPORT  
SERVICE.